PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Approation of Docket Harring	Application	or	Docket	Numbe
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CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY			
TO	OTAL CLAIMS	26						RATE	FEE	1	RATE	FEE
FC	PR ·		NUMBER	FILED	NUME	BER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TC	TAL CHARGEA	ABLE CLAIMS	26 min	nus 20=	*	4		X\$ 9=		or	X\$18=	108
IND	DEPENDENT CL	_AIMS	t(m	inus 3 =	*	1.		X42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in o					column 2		TOTAL		OR	TOTAL	932	
CLAIMS AS AMENDED - PART II									1 -	OTHER	THAN	
		(Column 1)	1	(Colur		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL: FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI						+140=		OR	+280=	
BEST AVAILABLE COPY						' I	TOTAL			TOTAL		
								ADDIT. FEE		OR	ADDIT. FEE	,
		(Column 1) CLAIMS		(Colur HIGH	EST	(Column 3)	1 [ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM		<u>ا</u> ا	+140=		OR	+280=	
							l	TOTAL			TOTAL	
		52. 0				- ai	,	ADDIT. FEE	<u>-</u>	OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)	١,					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	المراجعة المؤاه	OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	V V
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM]			UH		
	16 sh	4 in lana than t	no ostavia salv	imp 2 write	. "O" in oc	ohumo 3		+140=		OR	+280=	*
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												1
	The *Highest Nun	nber Previously Pa	id For" (Total o	r Independ	ent) is the	e highest numbe	er fou	and in the app	oropriate box	k in co	lumn 1.	-